

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A-S	943	2-9-1
RESPONSE FORMALITY REVIEW	CC	3C1114	10-05-0

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	3/7/02
	8/1/02
	6/25/03
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Claim	Date
Final	
Original	9/7/02
	8/1/02
	6/25/03
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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CK

3C-571  
10/50/01  
10/05/01